

**Nonimmigrant Petition based
on Blanket L Petition****INSTRUCTIONS****Purpose Of This Form.**

This form is for an employer to classify employees as L-1 nonimmigrant intracompany transferees under a blanket L petition approval.

Who May File.

An employer who has already obtained approval of a blanket L-1 petition may file this form to classify employees outside the U.S. as executives, managers, or specialized knowledge professionals. If the employee is in the U.S. and you are requesting a change of status or extension of stay for that employee, use Form I-129, Petition for a Nonimmigrant Worker.

General Filing Instructions.

Please answer all questions by typing or clearly printing in black ink. Indicate that an item is not applicable with "N/A". If the answer is "none", write "none". If you need extra space to answer any item, attach a sheet of paper with your name and your alien registration number (A#), if any, and indicate the number of the item to which the answer refers. You must file your petition with the required Initial Evidence. Your petition must be properly signed and filed with the correct fee. Retain a copy of the form for your records.

Translations. Any foreign language document must be accompanied by a full English translation which the translator has certified as complete and correct, and by the translator's certification that he or she is competent to translate from the foreign language into English.

Copies. If these instructions state that a copy of a document may be filed with this petition, and you choose to send us the original, we may keep that original for our records.

Initial Evidence.

You must file your petition with:

- a copy of the approval notice for the blanket petition;
- a letter from the alien's foreign qualifying employer detailing his/her dates of employment, job duties, qualifications and salary, demonstrating that the alien worked for the employer for at least one continuous year in the three year period preceeding the filing of the petition in an executive, managerial or specialized knowledge professional capacity; and
- if the alien is a specialized knowledge professional, a copy of a U.S. degree, a foreign degree equivalent to a U.S. degree, or evidence establishing that the combination of the beneficiary's education and experience is the equivalent of a U.S. degree.

Where to File.

If the alien requires a visa, he/she should present the completed petition to the U.S. Consular Officer. If the alien is not required to obtain a visa, he/she should file this petition at the INS Service Center which approved the blanket petition.

Fee.

There is no fee for this petition.

Processing Information.

Acceptance. Any petition that is not signed, or is not accompanied by the correct fee, will be rejected with a notice that the petition is deficient. You may correct the deficiency and resubmit the petition. However, a petition is not considered properly filed until accepted by the Service.

Initial processing. Once a petition has been accepted, it will be checked for completeness, including submission of the required initial evidence. If you do not completely fill out the form, or file it without required initial evidence, you will not establish a basis for eligibility, and we may deny your petition.

Requests for more information or interview. We may request more information or evidence, or we may request that you appear at an INS office for an interview. We may also request that you submit the originals of any copy. We will return these originals when they are no longer required.

Decision. You will be notified in writing of the decision on your petition. If you filed it at an INS Service Center and it is approved, the petition will be sent to you so you can send it to the alien to present at a port of entry when he enters the U.S.

Penalties.

If you knowingly and willfully falsify or conceal a material fact or submit a false document with this request, we will deny the benefit you are filing for, and may deny any other immigration benefit. In addition, you will face severe penalties provided by law, and may be subject to criminal prosecution.

Privacy Act Notice.

We ask for the information on this form, and associated evidence, to determine if you have established eligibility for the immigration benefit you are filing for. Our legal right to ask for this information is in 8 USC 1154. We may provide this information to other government agencies. Failure to provide this information, and any requested evidence, may delay a final decision or result in denial of your request.

Paperwork Reduction Act Notice.

A person is not required to respond to a collection of information unless it displays a currently valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. Often this is difficult because some immigration laws are very complex. The estimated average time to complete and file this application is as follows: (1) 10 minutes to learn about the law and form; (2) 10 minutes to complete the form; and (3) 15 minutes to assemble and file the petition; for a total estimated average of 35 minutes per petition. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Immigration and Naturalization Service, HQPDI, 425 I Street, N.W., Room 4307r, Washington, DC 20536; OMB No. 1115-0128. **DO NOT MAIL YOUR COMPLETED APPLICATION TO THIS ADDRESS.**

U.S. Department at Justice
Immigration and Naturalization Service

Nonimmigrant Petition based on Blanket L Petition

START HERE - Please Type or Print

Part 1. Information about employer.

Sponsoring Company or
Organization's Name

Address - ATTN:

Street Number
and Name

Room
#

City
or Town

State or
Province

Country

ZIP/Postal
Code

Part 2. Information about employment.

This alien will be a:

- a. ☐ manager/executive
b. ☐ specialized knowledge professional

Blanket petition approval number is: _____

Part 3. Information about employee.

Family
Name

Given
Name

Middle
Initial

Foreign Address
Street Number and Name

Apt.
#

City

State or
Province

Country

ZIP/Postal
Code

Date of Birth
(Month/Day/Year)

Country
of Birth

Part 4. Additional information about the employment.

Address

Street Number
and Name

Room
#

City
or Town

State or
Province

Country

ZIP/Postal
Code

Dates of intended employment
(Month/Day/Year) From

To

Weekly
Wage

Hours per
Week

Title and detailed description of duties to be performed.

FOR INS USE ONLY

Returned

Receipt

Resubmitted

Reloc Sent

Reloc Rec'd

- ☐ Petitioner
Interviewed
☐ Beneficiary
Interviewed

Approved as:

- ☐ manager/executive
☐ specialized knowledge professional

Validity dates

From: _____

To: _____

Denied (give reason)

Action Block

To Be Completed by
Attorney or Representative, if any

- ☐ Fill in box if G-28 is attached to represent
the petitioner

VOLAG#

Part 4. (Continued).

Give the alien's dates of prior periods of stay in the U.S. in a work authorized capacity and the type of visa.

Give the alien's dates of employment and job duties for the immediate prior three years.

Summarize the alien's education and other work experience.

Part 5. Signature. Read the information on penalties in the instructions before completing this section.

I certify, under penalty of perjury under the laws of the United States of America, that this petition, and the evidence submitted with it, is all true and correct. I am filing this on behalf of an organization, I certify that I am empowered to do so by that organization. If this petition is to extend a prior petition, I certify that the proposed employment is under the same terms and conditions as in the prior approved petition. I authorize the release of any information from my records, or from the petitioning organization's records, which the Immigration and Naturalization Service needs to determine eligibility for the benefit being sought.

Signature

Print Name

Date

Please Note: If you do not completely fill out this form, or fail to submit required documents listed in the instructions, then the person(s) filed for cannot be found eligible for the requested benefit, and your petition may be denied.

Part 6. Signature of person preparing form if other than above.

I declare that I prepared this application at the request of the above person and it is based on all information of which I have knowledge.

Signature

Print Name

Date

Firm Name
and Address